DOCUMENT RESUME

ED 308 645 EC 220 508

TITLE Community Living 2000: A Time of Change, A Time of Challenge.
INSTITUTION Canadian Association for Community Living, Downsview (Ontario).
PUB DATE 87
NOTE 17p.
AVAILABLE FROM Canadian Association for Community Living, Kinsmen Building, 4700 Keele St., Downsview, Ontario M3J 1P3 Canada.
PUB TYPE Guides - Non-Classroom Use (055) -- Reports - Descriptive (141)

EDRS PRICE MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS Community Programs; Deinstitutionalization (of Disabled); Foreign Countries; *Long Range Planning; *Mainstreaming; *Mental Retardation; *Normalization (Handicapped); *Objectives; Social Integration; Values
IDENTIFIERS *Canada

ABSTRACT

The booklet describes the goal of the Canadian Association for Community Living that all Canadian citizens with mental retardation will, by the year 2000, be part of families and communities with a voice in decisions affecting their lives. The history of the association since the 1950's is briefly reviewed and remaining obstacles to the longterm goal identified. An agenda to be achieved by 1992 includes such goals as all children attending neighborhood schools, a decrease in the number of people in sheltered workshops due to increased employment in the competitive sector, and no further admissions to institutions. Examples are given of existing successful implementations of the various components of the Association's agenda. The last section explains what families and communities can do to further the goal of full integration. Finally, the addresses of provincial and territorial associations working on behalf of persons with mental handicaps are given. (DB)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED308645

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☐ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL IN MICROFICHE ONLY HAS BEEN GRANTED BY

S. Clark

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

Community Living 2000

A TIME OF CHANGE,
A TIME OF CHALLENGE

EC 220508

CANADIAN ASSOCIATION FOR COMMUNITY LIVING
Kinsmen Building
4700 Keele Street
Downsview, Ontario M3J 1P3
CANADA (416) 661-9611

1987

Community living

TABLE OF CONTENTS

A NEW VISION 4

THE HISTORY 5

AN AGENDA 6

WHAT DOES THIS MEAN? 6

- A MEANINGFUL FAMILY LIFE FOR CHILDREN 6
- A REAL EDUCATION IN REGULAR CLASSES 7
- MEANINGFUL WORK 9
- REPLACING INSTITUTIONS 11
- CHOOSING HOW TO SPEND PUBLIC FUNDS 12
- PERSONAL SUPPORT NETWORKS 12

WHAT CAN YOU DO? 13

CONCLUSION 14

Community living

Children are entering the schools and classrooms of their friends.

THE 1980s have brought about many changes in the lives of people with mental handicaps:

- The Charter of Rights and Freedoms has recognized the citizenship of people with mental handicaps.
- Institutions for individuals with a mental handicap are closing across the country.
- More families with members who have a handicap are being supported to stay together.
- Children with mental handicaps are entering the schools and classrooms of their friends.
- More adults with mental handicaps are getting paying jobs in the community.
- More people with mental handicaps are present in the community and are making contributions to the social and economic life of their families, households, neighbourhoods, schools and places of work.
- Government funding and policies are increasingly in support of community living.

Despite this progress, a great many challenges still face us.

- Tens of thousands of persons with mental handicaps are still living in institutions, hospitals, special care homes, nursing homes, and other places that congregate and segregate people.
- Families, in many parts of the country, receive little or no support and resort to using institutions as their only source of relief.
- Children are still entering and not leaving institutions.
- Children are still being excluded from regular schools and regular classrooms.
- Children are still not being prepared for adult life and citizenship.
- Adults are still being excluded from real work in the community.
- People with mental handicaps who are living in the community are still leading lives of isolation and loneliness.
- Adults are still being forced to live with groups of people with handicaps not of their own choosing and under the control and regimentation of institutional patterns of life. They are forced to live in 'services' rather than homes.
- Government funding and policy still permit and encourage institutional, impersonal, and wasteful patterns of service.

A NEW VISION

The Canadian Association for Community Living believes that Canadians need to understand what is possible for people with mental handicaps. They need to have a vision that is realistic, desirable, and achievable. A vision of what reality will be in the year 2000.

- *Everyone will be a member of a family and belong to a group of friends they have chosen.*
- *Children will go to school in their own neighbourhoods alongside their friends and grow up to take their place in society.*
- *All adults will have meaningful work to do. They will have jobs that pay fair wages. Modern technology and common sense will be used to extend the productive capacity of people who are constrained by disabilities.*
- *People who need support to carry on with daily life will have a say in how they get that support when it is paid for by the government.*
- *People who have disabilities will be able to count on the help they need to do their part, be proud of their contribution, be a part of things and gain the respect of others.*

People with disabilities can be proud of their contribution and gain the respect of others.

In other words, the lives of people with mental handicaps will be characterized by:

CITIZENSHIP – Having rights and freedoms respected and protected, but also having the opportunity to meet obligations as participating and contributing citizens.
MEMBERSHIP – Belonging to families, friends, neighbourhoods, schools, places of work, the community.
DETERMINATION – Having an active and decisive voice in decisions which affect their lives.

The Canadian Association for Community Living also believes that we must bring about conditions for people with mental handicaps which:

- *Minimize the restrictions on their lives and enhance the freedoms and opportunities. This means organizing supports and services so that they encourage the development of friendships and commitments.*
- *Enable people to gain control of their lives. This means organizing supports and services so that people who need assistance can have a say in when and how they get it.*
- *Enable people to build their own way of life. This means organizing the way help is given so that people's lives are not defined, offered, and controlled by services.*
- *Ensure continuity. This means organizing and managing services and supports into a system, so that people will know what to expect, count on it being there when it is supposed to be, and can be sure that it will not break down just when they really need it.*

The support received by people with mental handicaps should:

- *Be chosen by the person.*
- *Make the person more able.*
- *Be offered in a way that helps a person achieve full citizenship, membership and participation.*

THE HISTORY

THE 1950s

The Canadian Association for Community Living was formed in 1958 as a federation of provincial associations. Local associations were originally set up as parent-to-parent support groups who wanted community alternatives to institutions for their children. They lobbied for special schools in the community for children, and for more smaller and better provincial institutions. Sheltered workshops began to emerge as extensions of the schools. Many associations branched out from running schools to running special summer camps.

THE 1960s

The association undertook a bold initiative to develop expertise and programs which would improve the lives of people with mental handicaps. A "National Crusade" was launched and the result was the "Centennial Project Series" – fourteen pilot projects across Canada aimed at developing technical and professional expertise and new types of services.

THE 1970s

The association launched "The Plan for the Seventies" which aimed to develop and demonstrate regional, coordinated, comprehensive community service systems. This idea was known as "ComServ". Provincial associations were encouraged to develop experimental and demonstration projects in one region of each province. Technical support for the projects, including a massive training effort, would be the role of the new National Institute on Mental Retardation (now the G. Allan Roeher Institute) which was established by the association. There have been three rather distinctive phases in the fifteen-year evolution of the ComServ effort:

- Developing regional service systems coordinated for individuals;
- Developing constituencies for change by mobilizing people around individuals and families;
- Directly shaping provincial government policy and actions.

THE 1980s

With the realization that even if there were a perfect service system for individuals with mental handicaps, it would not guarantee that they would be true, participating members of society, the association began to place a much greater emphasis on the notion of developing support networks around individuals rather than only on developing services.

In addition, the Charter of Rights and Freedoms placed much of the association's work in the context of human and civil rights. The association contributed significantly to the Charter and other human rights legislation and supported individuals with handicaps to speak out on their own behalf.

The People First movement has begun to guide much of the association's thinking about its role as advocate on behalf of individuals with mental handicaps.

There is a greater emphasis on developing support networks around individuals.

AN AGENDA

In November 1986, the general membership of the Canadian Association for Community Living adopted an agenda for the following five years. These seven objectives for 1992 are feasible and ambitious steps toward the vision we share.

1. *By 1992, all children will have a meaningful family life.*
2. *By 1992, all children will go to school together with other children in the neighbourhood and have an age-appropriate program to match their needs in regular school classes.*
3. *By 1992, everyone leaving high school will have the opportunity to get and keep meaningful work in integrated settings.*
4. *The number of people in sheltered workshops will decrease by ten percent per year from the 1986 level as a result of people becoming employed.*
5. *The use of tax dollars to meet people's needs will be decided between the person who needs help and the provincial government.*
6. *By 1987, admissions to institutions will stop and evacuation will proceed at ten percent per year based on 1986 populations.*
7. *By 1992, a personal support network, ensuring the individual's place among family and friends, will be a commonplace approach to assuring one's future.*

WHAT DOES THIS MEAN?

These objectives are ambitious ones. They are, however, based on a fundamental commitment to the dignity and citizenship of people with mental handicaps. They are also based on our growing experience of what we know is possible.

A MEANINGFUL FAMILY LIFE FOR CHILDREN

Right across Canada, citizens and governments proclaim that the family is the cornerstone of our society. Families have the potential to provide love, affection, security and comfort. For a child, the security of the family provides the crucial context for social and emotional development. Families are in the best position to provide continuity in the lives of both children and adults.

In the past, the families of children with handicaps have received little or no support to keep their children at home. Many children have had to leave their families to live in institutional services resulting in family breakdown.

Fortunately, times are changing. The importance of families, is being recognized, respected and protected. Various communities and governments have taken steps to keep children and families together. These steps include:

- *Offering support to families right from the beginning. This means making sure that families have the skills they need to encourage the growth and development of their child, often by having professionals teach parents what to do in their own homes rather than bringing children to special centres.*

Children growing up with their families are more involved in their communities.

- *Providing financial assistance to families so that they can obtain services or equipment in the community that will be useful to them, rather than requiring their children to enter special services in order to get what they need.*
- *Assisting children and families to get access to services which build connections in the community for the family and the child. For example, participating in regular parents-and-tots activities or going to the regular day care centre.*
- *Ensuring that children who cannot live with their natural families have the opportunity to live with "alternative" or "associate" families rather than with a group of other children who have handicaps.*
- *Preventing children from entering institutions, ensuring that all children living in institutions leave them, and ensuring that children living in group arrangements move to family living situations.*

The results of efforts to promote a meaningful family life for children have been impressive. In some provinces and communities:

- *There are no children living in institutions or group homes;*
- *There are no children entering institutions;*
- *Families who have received support early, are increasingly demanding a fully integrated education for their children;*
- *Families who have received money to buy what they need are using more regular services in the community – regular babysitters, regular doctors – and buying things which often can help keep the family together like wheelchairs and lifts for mobility, computers for communication and tutors for extra learning;*
- *Children growing up with their families are more involved in their communities and are developing friendships and connections which will probably last a lifetime.*

A REAL EDUCATION IN REGULAR CLASSES

Right across Canada, parents, students and professionals are radically changing their views on "what's good enough" for students with special needs.

It used to be that it was good enough that children with special needs be in a special school or at best in a special class in a regular school.

In a growing number of communities, however, students with special needs are learning in regular classrooms alongside other non-handicapped children. They not only see other children at school, they play with them in the neighbourhood and share in the life of their community.

Students with special needs need to learn things which will be useful to them as contributing adults living in communities. A segregated education prepares children for segregated lives. An integrated education allows students to achieve their fullest development as individuals and as members of society.

When families, educators and students with and without handicaps have a chance to work together for a decent education, the results can be very encouraging:

Children with handicaps are learning in regular classrooms alongside other non-handicapped children.

- *Students with special needs, including those with very challenging needs, learn best when they learn alongside and from other children who are not handicapped. When they are only with other students with handicaps, what they learn best is to be handicapped.*
- *Students with special needs learn to "act their age" when they are with students their own age. When they are with younger students, they learn to act younger.*

- *Regular teachers are fully capable of providing a quality education to students with special needs when they are supported and challenged to do so.*
- *The only way to provide an integrated education is to provide both meaningful instruction and rich opportunities for all students to interact with one another, to learn from and teach one another.*

> *Since full integration has occurred, we have found that these special students have experienced fewer discipline problems, are better able to handle their own self-care with minimal assistance, have made friends with the regular students, and are meeting with success in academic areas for the first time.*
> *(a principal in Woodstock, New Brunswick).*

These are results from real experiences in communities across Canada.

- *In a small number of school boards across Canada, policy and practice are clear – all students will attend the schools and classes they would attend were they not handicapped. All regular teachers will be expected to teach all students, and will be supported to do so.*

Increasingly, provincial and territorial governments are moving in this direction.

> *It is not the policy of the Department of Education to establish classes for special needs students. Exceptions to this policy require the written authorization of the Superintendent and are subject to the procedures established by the Region/Board.*
> *a) All special needs students, including those in hospital, must be placed on the N.W.T. School Register in a regular class.*
> *b) Students should be placed with their age appropriate peers wherever possible.*
> *c) Modifications to the classroom environment and the classroom program should occur, when necessary, to meet the special needs of the student.*
> *d) Support for the classroom teacher is essential in order to provide appropriate programs for special needs students within the regular classroom.*
> *(A Departmental Directive and Guidelines for Special Needs Education, Northwest Territories.)*

Integration means meaningful instruction and opportunities for all students to interact and learn from each other.

- *Teachers who were formerly responsible for special classes are being reassigned to assist regular teachers to meet their responsibilities for all students. Teacher aides are moving from special classes to regular classes to assist regular teachers and to facilitate integration. Regular students are helping their classmates who have special needs to learn and belong. Students with special needs are teaching their non-handicapped classmates to learn and belong.*
- *Teaching is moving out of the classroom so that students can learn skills which will be truly useful to them as adults – crossing the street, using transit, getting a job, going to the bank, shopping in a store.*
- *The regular curriculum is being adapted so that what is taught is meaningful to the student. When individual students are unable to learn something, adaptations are developed so that the student can still perform a skill. For instance, a student who cannot learn to add and subtract is taught to use a calculator; a student who cannot follow written instructions is taught to follow a sequence of pictures to complete a task.*

MEANINGFUL WORK

Typically, young adults and adults with mental handicaps have not been supported to find, obtain, and keep real jobs. By and large, their education in no way prepared them for work, or at best, prepared them for sheltered work. Until recently, the only options available for adults were unemployment, sheltered work, or institutional training.

People learn work skills best in real places of work and from fellow workers.

A number of Canadian communities, however, have realized and are acting upon the following:

- *A public education which is geared for adult life can and should include experiences and opportunities related to employment. Secondary school students who have the opportunity to work and learn about work in the community have a much better chance of getting and keeping jobs when they are adults.*
- *People with mental handicaps, including those with very challenging needs, are capable of working for pay in regular community businesses, alongside non-handicapped people. Many individuals require some assistance in finding work and in learning to do the job. Some individuals require this assistance on a long term basis.*
- *People with mental handicaps learn work skills and behaviours best in real places of work, from fellow workers.*
- *It is possible to adapt environments physically and socially so that individuals can do rather complex tasks that they might not be able to do otherwise. For instance, a young man who cannot count to ten can stack the appropriate number of dishes in the kitchen of a restaurant if a mark is put on the wall at the appropriate height.*

In basing their approach on these premises, communities have also developed a much better idea of how to design education programs for young adults and employment supports for adults. There are three essential elements in this design.

- *To do meaningful work that regular workers are paid to do in regular businesses, not "make work" or "busy work", but real work that gives a feeling of accomplishment.*
- *To work in integrated places of work alongside non-handicapped people who can be role models and with whom one can develop a relationship.*
- *To be paid fairly for the work done. This means completing tasks at a rate and quality that is in line with what employers expect of all workers and being paid what other workers are paid for the work. In some cases, however, individuals will not be able to produce at a rate or quality that is comparable to the expectations of employers. In such cases, this means being paid according to what their work is worth.*

At least two out of three of these objectives should be a minimum standard for any employment or vocational service. The least desirable combination of these elements is meaningful work for pay, but in segregated settings. Across Canada, community groups and agencies have either established business or negotiated arrangements with existing businesses to create work opportunities for groups of people with mental handicaps. These work opportunities involve meaningful work, and the workers get paid a competitive wage, but they only or mainly work in the presence of other people with handicaps. Such initiatives range from special businesses employing over

one hundred people with handicaps, to small groups of people with handicaps who work in isolated areas of regular businesses. This approach has allowed a number of sheltered workshops, for instance, to create new employment opportunities in the community which pay competitive wages to people with handicaps. It has also been a more comfortable way for agencies to provide employment and pay for people with challenging needs.

The best "two out of three" combination would be meaningful work and integration, usually with the hope that the person with a handicap will be paid fairly once the job is learned and a consistent rate of production is established. A number of secondary school programs, for instance, assist students with handicaps to find work for short periods of time in order to gain experience. The work is real work in regular businesses, but is not paid. It is seen as part of training and getting experience.

A number of programs for adults have also taken this approach, either providing short term work experiences or longer term employment placements. In many cases, employers are asked to pay individuals for the work done, but if this is not possible, they do the work, and at least receive the income they received formerly in the workshop. The emphasis in such approaches is on getting a job, providing support and training to the individual to learn and do the job for as long as necessary, and encouraging the development of relationships with co-workers. This approach has meant that a number of agencies have moved significant numbers of people, including those with challenging needs, out of the workshop and into regular jobs.

People with handicaps then have the opportunity to:

- work;
- be seen as producers and contributors;
- develop relationships;
- develop credibility as workers.

More and more communities are demonstrating that it is also possible to have "three out of three" elements present. That is, meaningful work in integrated settings, for fair pay. Many people with handicaps have been working in such situations for a number of years. What is changing is that people with very challenging needs are being supported to work in such situations. People whose physical needs, abilities to learn, or behaviour needs once stood in the way of employment, are now seen as valuable and contributing workers.

Right across Canada, in urban and rural areas, in areas of high and relatively low unemployment, in rich and poor communities, this is becoming a reality. Regular jobs in regular places of business have been found and kept. New businesses have been created which provide employment opportunities for people with and without handicaps.

Frequently, such efforts have meant that individuals receive far more support than they would receive in a workshop. Over time, however, they become more able, with the support of their co-workers, to do the work without paid assistance from an agency. Over time, more people can work with less support than required in the workshop. More importantly, more people with mental handicaps become tax payers and contributors to the economic life of the community, rather than people who are dependent on the work of others.

For decades there has been little choice for families except the institution.

REPLACING INSTITUTIONS

Tens of thousands of people with mental handicaps still live in public and private institutions. The reasons for this are numerous:

- *Many still believe that there are some individuals who will always require "total care" and who are incapable of living and participating in the community.*
- *There has been a long history of offering no community support to families to keep their children at home. Their only choice often was either institutionalize the child or make do on their own.*
- *There has been a lack of attention paid to the development and delivery of services in the community. For decades, there has been very little choice for families except the institution or life in the community without support.*
- *For decades, and still in too many provinces, the vast majority of government funds have been dedicated to the operation of institutions rather than the development of community services and support. In times of restraint, there have been too few funds devoted to the development of quality community services, and little commitment to redirecting existing funds in this way.*
- *Professionals and local economies still depend on the continued existence of institutions – often very large employers and contributors in local economies. The unfortunate reality is that often people with handicaps have become commodities upon which professionals and communities depend for their economic well-being.*

Thanks to the pioneering and continuing efforts of communities and governments across North America, we now know that these reasons are no longer valid. People with handicaps and the communities of Canada are able to accept and support each other.

More and more communities and governments are moving in the direction heralded by a former minister of social services in Newfoundland and Labrador.

> *Institutions have no place in the lives of /people with mental handicaps/ in Newfoundland and Labrador. They provide little more than custodial care. The place for individuals to learn to live in a community, is in a community, and that this is not only a legitimate expectation, but a right . . . /The/ continued use of scarce resources to "fix-up" our two institutions will only serve to continue the handicapping of the residents and delay the development of community-based services.*
> *(The Honourable Thomas V. Hickey, 1982).*

Most provinces have developed community services which have slowed down the demand for institutional placement.

- *As more supports are offered to families and an education is available to children, the demand for institutional placement has declined.*
- *Two provinces, Newfoundland and New Brunswick, have closed their institutions for children.*
- *Most provinces have developed community services which have at least slowed down the demand for institutional placement and increased the confidence and abilities of communities to return people to the community.*
- *A number of provinces have closed some of their existing institutions, or at least committed themselves to phasing down their size. Resources formerly committed to institutions are being redirected to the community.*
- *People with challenging health or behaviour needs are being supported to live, work and participate in the community.*

Such efforts have meant much to people and communities –

- Families long separated have been reunited.
- People who were seen as fundamentally incapable are seen as powerfully capable.
- Members of communities, long exiled from those communities, have been welcomed back and supported to stay.
- Families, community agencies, and ordinary citizens have discovered their own capabilities as they have been supported to stand beside individuals they formerly saw as incapable of living in the community.
- The ordinary places of our communities – malls, arenas, stores, schools, places of worship, businesses and service clubs – are now the places where people with mental handicaps do business, have fun, work, worship, belong, participate, contribute.

CHOOSING HOW TO SPEND PUBLIC FUNDS

In order to achieve the goals of family support, education, employment and the replacing of institutions, it is essential to determine how money is spent in supporting individuals with handicaps.

In trying to meet the perceived needs of individuals with handicaps, a great deal of money has been spent by governments which assumed that the needs of all people with handicaps were the same. Institutions were developed as the major response to people who were seen as in need of care. Group homes were developed in response to people who needed a place to live away from home. Workshops were developed to teach people to work. Special schools and classes were developed to provide an education. Few options were presented to individuals and families – the challenge was for them to fit into the existing services.

We now know that not only can services and supports be built around individual needs but they can also be provided in a way that respects the fundamental rights and freedoms of people. What services do and how government money is spent should be based on:

- A negotiated contract involving the individual (family, friends and advocates), the government (as the major purchaser of services and definer of rights and freedoms), and service providers (those responsible for providing services and supports).
- The strengths and needs of the individual and the support required to realize a positive vision of the future for that individual, and the rights and freedoms of the individual as a citizen.

PERSONAL SUPPORT NETWORKS

Another essential element in achieving the goals of family support, education, employment and replacing institutions is the nature of the people on whom individuals with handicaps depend to stand beside them.

Traditionally, people with handicaps have been seen as dependent on the assistance and caring of others. This view is based on the belief that a mental handicap renders the individual incapable of engaging in many, if not most, meaningful life activities. Families were often encouraged to relieve themselves of "the burden of having a handicapped child" and began to

depend on professionals for the support they may have received from friends and other family members.

We now know that individuals with mental handicaps have abilities, and can make significant contributions to the quality of their own lives and the life of communities. They are capable of living a life of interdependence, of mutual reliance, just like anyone else.

The idea of a personal support network is really quite simple – a group of people upon whom an individual depends – family, friends, fellow students, co-workers, members of the congregation, bowling partners, and so on. The network of people who ask us questions, give advice, act on our behalf, invite us out, give us leads for jobs, help fix up the basement; things which are freely given as part of living, not as an activity for which people expect to be paid.

Communities are just beginning to rediscover the power of such networks in the lives of people with mental handicaps. The challenge is to ensure that people with mental handicaps discover that power.

That means that individuals must be supported and encouraged to develop relationships in places where relationships develop naturally, for instance, schools, places of worship and places of work. In addition, non-handicapped individuals at these places must be encouraged to develop relationships with handicapped individuals.

Communities are rediscovering the power of personal support networks in the lives of people with handicaps.

WHAT CAN YOU DO?

The Canadian Association for Community Living, in collaboration with territorial, provincial and local associations across the country, is organizing its efforts to achieve this vision. Associations, however, cannot do it alone – the people, communities and governments of Canada must be involved. We, as an organization, have identified the challenge, but we, as a country, must meet it.

As families and communities, we must recognize our responsibilities and act on them.

- Families have a responsibility to raise children, to provide them with affection and security, to think about and plan for the future, to defend their children's rights so they get what they need. They have a responsibility to ensure that the services they and their children receive are of good quality.
- Agencies and services that serve communities have a responsibility to serve all citizens, including those with mental handicaps, and to ensure that those citizens get good services – a good education, good health care, help in finding a job, and so on. They have a responsibility to design and deliver their services in such a way that meets the needs of individuals.
- Ordinary citizens (neighbours, workers, worshippers) have a responsibility to help out their neighbours and fellow citizens, and to rely on one another to solve problems in their community. They also have an obligation to recognize the contribution that people with mental handicaps can make to the community.
- Associations working on behalf of people with mental handicaps have a responsibility to stand beside people and assist them to get what they need, but also to work as part of their community and for the common good.

- Communities as a whole have a responsibility to think about the future and improve the quality of life for all community members.

People with mental handicaps also have responsibilities:

- to make a contribution to their community;
- to develop and use their talents;
- to earn the respect of their fellow citizens to the best of their abilities.

People with mental handicaps have the right, the ability, and the responsibility to live in the communities of this country as respected and responsible citizens. As a society, our responsibility is to support them to develop their abilities, respect their rights, and ensure they meet their responsibilities to the fullest extent of which they are capable. Our goal is that they be competent citizens who contribute to and receive the benefits of community living. Based on what has happened in this country, we know that this is possible.

To make it possible in even more communities, we must help these communities become competent to meet their responsibilities – to support members of the community and to recognize the contribution that each citizen can make.

People with handicaps and communities often need support to meet their responsibilities. The fundamental role of government should be to support the on-going development of competent citizens and competent communities, and to ensure that the rights of citizens are respected and protected.

CONCLUSION

The Canadian Association for Community Living has identified seven objectives for 1992 as feasible though ambitious steps towards achieving the vision of Community Living 2000. Their attainment alone would not complete our vision for the year 2000, but they have been identified as practical, and realistic steps toward that vision.

1. FAMILY LIFE: By 1992 all children will have a meaningful family life.
2. A COMMUNITY EDUCATION: By 1992, all children will go to school together with other children in the neighbourhood and get an age-appropriate program to match their needs in regular school classes.
3. REAL EMPLOYMENT: By 1992, everyone leaving high school will have the opportunity to get and keep meaningful work in integrated settings.
4. REDUCTION OF SHELTERED EMPLOYMENT: The number of people in sheltered workshops will decrease by ten percent per year from the 1986 level as a result of people becoming employed.
5. SYSTEM REDESIGN: The use of tax dollars to meet people's needs will be decided between the person who needs help and the provincial government.
6. POLITICAL COMMITMENT TO REPLACING INSTITUTIONS: By 1987, admissions to institutions will stop and evacuation will proceed at ten percent per year based on 1986 populations.

7. QUALITY OF LIFE: By 1992, a personal support network, securing the individual's place among family and friends, will be a commonplace approach to assuring one's future.

The Canadian Association for Community Living invites communities, governments, professionals and interested individuals to join local and provincial associations working on behalf of people with mental handicaps to work together to make Community Living 2000 a reality.

To find out what you can do in your community to support Community Living 2000, contact the following provincial and territorial associations working on behalf of persons with mental handicaps.

BRITISH COLUMBIANS FOR MENTALLY HANDICAPPED PEOPLE
#300-30 East 6th Avenue, Vancouver, B.C. V5T 4P4

SASKATCHEWAN ASSOCIATION FOR THE MENTALLY RETARDED
3031 Louise Street, Saskatoon, Saskatchewan S7J 3L1

ONTARIO ASSOCIATION FOR THE MENTALLY RETARDED
1376 Bayview Avenue, Toronto, Ontario M4G 3A3

CANADIAN ASSOCIATION FOR THE MENTALLY RETARDED
– NOVA SCOTIA DIVISION
83 Portland Street, Dartmouth, Nova Scotia B2Y 1H5

ALBERTA ASSOCIATION FOR COMMUNITY LIVING
11728 Kingsway Avenue, Edmonton, Alberta T5G 0X5

ASSOCIATION FOR COMMUNITY LIVING – MANITOBA
#1-90 Market Avenue, Winnipeg, Manitoba R3B 0P3

ASSOCIATION DU QUÉBEC POUR LES DÉFICIENTS MENTAUX
3440, avenue de l'Hôtel-de-Ville, Montréal (Québec) H2X 3B4

NEW BRUNSWICK ASSOCIATION FOR COMMUNITY LIVING
86 York Street, 2nd floor, Fredericton, New Brunswick E3B 3N5

PRINCE EDWARD ISLAND ASSOCIATION FOR COMMUNITY LIVING
P.O. Box 280, Charlottetown, P.E.I. C1A 7K5

NEWFOUNDLAND ASSOCIATION FOR COMMUNITY LIVING
P.O. Box 5453, St. John's, Newfoundland A1C 5W4

YUKON ASSOCIATION FOR SPECIAL NEEDS PEOPLE
Box 4853, Whitehorse, Yukon Y1A 4N6

YELLOWKNIFE ASSOCIATION FOR THE MENTALLY HANDICAPPED
Box 981, Yellowknife, N.W.T X1A 2N7